Surface Coating of Wood Building Products NESHAP (subpart QQQQ) Semiannual Compliance Report

THIS IS A SAMPLE COMPLIANCE REPORT, WHICH CAN BE USED BY AFFECTED SOURCES AT THEIR DISCRETION TO COMPLY WITH 40 CFR Part 63 Subpart QQQQ, §63.4720(a).

Applicable Rule: 40 CFR Part 63, Subpart QQQQ – National Emission Standards for Hazardous

Air Pollutants: Surface Coating of Wood Building Products.

Note: Each semiannual compliance report must be postmarked or delivered no later than July 31 or January 31, whichever date is the first date following the end of the semiannual reporting period.

SECTION 1 GENERAL INFORMATION

A. Print or type the following information for each affected source at which surface coating operations are performed on wood building product(s) [§63.4720(a)(3)(i)]:

Operating Permit Number (OPTIONAL)		Facility I.D. Number	r (OPTION	IAL)
Responsible Official's Name/Title				
Street Address				
City State		ZII	P Code	
Facility Name				
Facility Name				
Facility Street Address (If different than Res	noncible Off	icial's Stroot Addross	.1	
Facility Street Address (II different triali Res	porisible Off	iciai s Street Address	·)	
Facility Local Contact Name	Title			Phone (OPTIONAL)
r acinty Local Contact Name	TILLE			THORE (OF HONAL)
City State			ZIP C	ode
B. Indicate the beginning and ending da [§63.4720(a)(3)(iii)]: Beginning: / / Date of this report: / /			d the date	e of this report
SECTION II CERTIFICATION (Note: you may edit the	e text in this	s section as deeme	ed approp	riate)
Based upon information and belief formed affected source at the above-mentioned formed true and complete. The affected source Subpart QQQQ during the semiannual results.	acility, cert	ify the information of the desired with applicable r	contained equireme	I in this report is accurate,
Signature, Responsible Official	Title			Date (mm/dd/yyyy)
, ,				

SECTION III COMPLIANCE

A.	Use the table below to indicate which compliance option(s) you used for each of your coating operations during the reporting period. If you used more than one option during the reporting period, indicate in the table the beginning and ending dates that you used each option and fill out all of the appropriate sections (B - D) below. [§63.4720(a)(3)(iv)]						
		Coating Operation	Compliant Materials Option	Emission Rate without Add-On Controls Option	Emission Rate with Add-On Controls Option		
B.	<u>For</u>	For affected sources using the compliant materials option:					
	 Each day in this reporting period, did you use only compliant coatings (e.g., those that did not exceed the applicable emission limit)? 						
		 ☐ Yes [§63.4720(a)(4)] ☐ No. Indicate below all coatings used that deviated from the emission limit and the dates an time periods the coatings were used. Explain why. Also include the calculation of the organic HAP content for each coating and the determination of mass fraction of organic HAF for each coating. [§63.4720(a)(5)] 					
	2)	Each day in this reporting period, did you use only thinners and cleaning materials with no organic HAP content?					
	 □ Yes [§63.4720(a)(4)] □ No. Indicate below all thinners and cleaning materials used that contained organic HAP the dates and time periods of use. Explain why. Also include the determination of mass fraction of organic HAP for each thinner and cleaning material. [§63.4720(a)(5)] 						
				y	, , , , , , , , , , , , , , , , , , ,		
C.	<u>For</u>	For affected sources using the emission rate without add-on controls option:					
	1) Did the 12-month rolling average for each month in the reporting period exceed the emission limit?				xceed the applicable		
	 □ No [§63.4720(a)(4)] □ Yes. Indicate below the beginning and ending dates of each compliance period du the 12-month rolling average organic HAP emission rate exceeded the applicable limit. Explain why. Also include the calculations used to determine the 12-month of HAP emission rate for each compliance period in which a deviation occurred. [§63.4720(a)(6)] 				e applicable emission e 12-month organic		

¹ A compliance period consists of 12 months. Each month is the end of a compliance period consisting of that month and the preceding 11 months. [§63.4742(a)]

D.	<u>For</u>	affected sources using the emission rate with add-on controls option:
	1)	Did the 12-month rolling average for each month in the reporting period exceed the applicable emission limit?
		□ No [§63.4720(a)(4)] □ Yes. Indicate below the beginning and ending dates of each compliance period in which the 12-month rolling average organic HAP emission rate exceeded the applicable emission limit. Explain why. Also include the calculations used to determine the 12-month organic HAP emission rate for each compliance period¹ in which a deviation occurred. [§63.4720(a)(7)(i)-(ii)]
	2)	Briefly describe your continuous parameter monitoring systems (CPMS), and indicate the date and time of the latest CPMS certification or audit. If applicable, indicate the date and times each CPMS was inoperative (except for low-level and high-level checks). [§63.4720(a)(7)(iv)-(vi)]
	3)	During the reporting period, were there any periods during which the CPMS was out-of-control (e.g., failed an audit or exceeded the allowable calibration drift)?
		□ No [§63.4720(a)(4)] □ Yes. Indicate the starting and ending dates and times, duration, and corrective actions taken when the CPMS was out-of-control. [§63.4720(a)(7)(vii)]
	4)	During the reporting period, have any of your capture or control devices been operated at daily average values greater than or less than (as appropriate) the operating parameter values established in the initial performance test?
		 □ No □ Yes. Indicate the dates and times when capture or control devices were operated at daily average values greater than or less than (as appropriate) the operating parameters and why. Also indicate whether each deviation occurred during a period of startup, shutdown, or malfunction or during another period. [§63.4720(a)(7)(viii), (xiv)]
	5)	Have any of your control devices been bypassed during the reporting period?
		 □ No □ Yes. Indicate the dates and times when control devices were bypassed and why. Also indicate whether each deviation occurred during a period of startup, shutdown, or malfunction or during another period. [§63.4720(a)(7)(viii), (xiv)]

6)	Include the following information for the reporting period: (a) the total duration of each deviation from an operating limit and each bypass of a control device, (b) the total duration of deviations as a percentage of the total operating time of your affected source, (c) a breakdown of the total duration of deviations (deviations from operating limits and bypasses of control devices) by cause (startup, shutdown, control equipment problems, process problems, other known causes, and unknown causes), (d) the total duration of CMPS downtime, and (e) the total duration of CPMS downtime as a percentage of the total operating time of your affected source. [§63.4720(a)(7)(ix)-(xi)]
7)	Have you made any changes to your CMPS, coating operations, or capture or control devices during the reporting period?
	□ No
	☐ Yes. Describe the changes. [§63.4720(a)(7)(xii)]
8)	During this reporting period, did you follow the required work practices (§63.4693) in accordance with your work practice plan?
	 ☐ Yes ☐ No. Provide a description of each deviation and an explanation of the cause of each deviation. Also include the dates and time periods of the deviation and the actions you took to correct the deviations. [§63.4720(a)(7)(xiii)]
emissio	UP, SHUTDOWN, AND MALFUNCTION (Only to be completed by affected sources using the n rate with add-on controls option)
Che	eck one of the following three statements and include the information listed:
	☐ During this reporting period, no startups, shutdowns or malfunctions took place.
	□ During this reporting period, all actions taken during startups, shutdowns and malfunctions were consistent with my SSMP. Indicate the starting and ending times of each malfunction. [§63.4720(c)(1); §63.4720(a)(7)(iii)]

During this reporting period, some actions that were taken during startups, shutdowns, and malfunctions were not consistent with my SSMP. Indicate the starting and ending times of each malfunction. Identify those events during which you took actions inconsistent with your SSMP but your affected source did not exceed the applicable emission limit. Include the number, duration, and a brief description for each type of malfunction that caused (or may have caused) the applicable emission limit to be exceeded. [§63.4720(a)(7)(iii);
§63.10(d)(5)(i)]

SECTION V

EMISSION RATE CALCULATIONS (Not required for affected sources using the compliant materials option)

Please include the calculation results for each 12-month rolling average emission rate during the 6-month reporting period from the affected source. [§63.4720(a)(3)(v)]:

Sample Response.

The following data show the calculation results for the emission rates from surface coating operations at the affected source during the period 01/01/04 - 6/30/04.

Month	Volume of Solids Applied (gal)	Monthly Emission Rate (lb HAP/gal solids)	Rolling 12-Month Avg Emission Rate (Ib HAP/gal solids)	HAPs Emitted (tons)
Jan 04	8,120	1.39	1.02	4.14
Feb 04	5,342	1.25	1.56	4.17
Mar 04	6,550	0.91	2.45	8.02
Apr 04	8,445	1.05	1.75	7.39
May 04	7,758	0.88	2.25	8.73
Jun 04	8,230	0.85	2.92	12.02
TOTAL	93,950	1.06 (avg)	1.99 (avg)	44.5

END OF FORM — Please make sure that a Responsible Official signs prior to submitting the form to your EPA Regional Office and your State Air Permitting Agency, as applicable.